

Minor Modification 1:
Pg. 6 – Changed sample type from composite
to grab samples.

State Permit Number WPCC 3131D/76
NPDES Permit Number DE 0000299
Effective Date: November 1, 1999
Expiration Date: October 31, 2004
Minor Modification Effective October 1, 2003

AUTHORIZATION TO DISCHARGE UNDER THE
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
AND THE LAWS OF THE
STATE OF DELAWARE

In compliance with the provisions of the Federal Water Pollution Control Act, as amended by the Clean Water Act of 1977 (33 U.S.C. 1251 et seq.) (hereinafter referred to as "the Act"), and pursuant to the provisions of 7 Del. C., 6003

Allen Family Foods, Inc.
P.O. Box 63
Harbeson, DE 19951

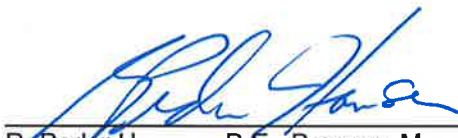
is authorized to discharge from the facility (Point Sources 001 and 002) located at

Route 5
Harbeson, DE

to receiving waters named

Beaverdam Creek

The effluent limitations, monitoring requirements and other permit conditions are set forth in Part I, II and III hereof.



R. Peder Hansen, P.E., Program Manager
Surface Water Discharges Section
Division of Water Resources
Department of Natural Resources and Environmental

September 23, 2003

Date Signed

Minor Modification 1: Changed Sample Type
from composite to grab samples.

Part I
State Permit Number WPCC 3131D/76
NPDES Permit Number DE 0000299
Page 6 of 19 Pages
Minor Modification 1 Effective Date: October 1, 2003

C.2. EFFLUENT LIMITATIONS

During the period beginning November 1, 2003 and lasting through the expiration date, the permittee is authorized to discharge from point source 002 the quantity of quality of effluent specified below:

Parameter	Effluent Limitations							Monitoring Requirements	
	Load			Concentration				Measurement Frequency	Sample Type
	Daily Average	Daily Maximum	Units	Daily Average	Daily Maximum	Maximum Instantaneous	Units		
Flow ¹			mgd	--				Once per quarter for two years, beginning in the fourth year of the permit.	Estimate
BOD ₅	--	--	--	--	--	--	mg/L		Grab
Total Suspended Solids	--	--	--	--	--	--	mg/L		Grab
pH							S.U.		Grab
Oil & Grease	--	--	--	--	--	--	mg/L		Grab
Total Phosphorus (as P)	--	--	--	--	--	--	mg/L		Grab
Ammonia (as N)	--	--	--	--	--	--	mg/L		Grab
Total Kjeldahl Nitrogen (as N)	--	--	--	--	--	--	mg/L		Grab
Ortho-phosphorus (as P)	--	--	--	--	--	--	mg/L		Grab
Nitrate Nitrogen (as N)	--	--	--	--	--	--	mg/L		Grab
Nitrite Nitrogen (as N)	--	--	--	--	--	--	mg/L		Grab
Enterococcus	--	--	--	--	--	--	Col/100mL		Grab
Only Storm Water may be discharged from these outfalls.									
The discharges shall be free from floating solids, sludge deposits, debris, oil and scum.									

All samples shall be collected from the discharge resulting from a storm event that is greater than 0.1 inches and at least 72 consecutive hours from the previously measurable (greater than 0.1 inch rainfall) storm event. All samples shall be taken within 30 minutes after discharge starts, or as soon thereafter as practicable. No sample shall be taken under circumstances that have the potential to endanger the person taking the sample.

¹ Report estimated flow at the time of storm water sampling.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NAME Allens Family Foods, Inc.
ADDRESS P.O. Box 63
Harbeson, Delaware 19951
FACILITY Delaware Route 5
LOCATION Harbeson, Delaware

DE 0000299		002	
PERMIT NUMBER		DISCHARGE NUMBER	
MONITORING PERIOD			
YEAR	MO	DAY	TO
YEAR	MO	DAY	

Effective 3rd year of permit thru
permit expiration
Designator A

NO DISCHARGE ☐

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUALITY OR CONCENTRATION (4 Card Only) (38-45)			QUALITY OR CONCENTRATION (46-53)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM									
Flow																
50050	SAMPLE MEASUREMENT	*	*	MGD	*	*	*	*	*	*	*	*	01/90	Est.		
BOD ₅	SAMPLE MEASUREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
00310	PERMIT REQUIREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
Total Suspended Solids	SAMPLE MEASUREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
00530	PERMIT REQUIREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
pH	SAMPLE MEASUREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
00400	PERMIT REQUIREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
Oil & Grease	SAMPLE MEASUREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
00556	PERMIT REQUIREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
Total Phosphorus (as P)	SAMPLE MEASUREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
00665	PERMIT REQUIREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
Ammonia (as N)	SAMPLE MEASUREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
00610	PERMIT REQUIREMENT	*	*	*	*	*	*	*	*	*	*	*	01/90	Grab		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT ANY FALSIFICATION OF THIS REPORT IS A VIOLATION OF FEDERAL LAWS AND INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. § 1001 AND 18 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)														
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT										AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (include Facility Name/Location if different)

NAME Allens Family Foods, Inc.
ADDRESS P.O. Box 63
Harbeson, Delaware 19951
FACILITY Delaware Route 5
LOCATION Harbeson, Delaware

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

DE 0000299		002	
PERMIT NUMBER		DISCHARGE NUMBER	
MONITORING PERIOD			
YEAR	MO	DAY	TO
YEAR	MO	DAY	

Effective 3rd year of permit thru
permit expiration
Designator A

NO DISCHARGE ☐

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (46-53)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)				
Ortho Phosphorus (as P) 00671	PERMIT REQUIREMENT	*	*	*	*	*	*	mg/L	*	01/90	Grab
	SAMPLE MEASUREMENT										
Nitrate Nitrogen (as N) 00620	PERMIT REQUIREMENT	*	*	*	*	*	*	mg/L	*	01/90	Grab
	SAMPLE MEASUREMENT										
Nitrite Nitrogen (as N) 00615	PERMIT REQUIREMENT	*	*	*	*	*	*	mg/L	*	01/90	Grab
	SAMPLE MEASUREMENT										
Enterococcus 31639	PERMIT REQUIREMENT	*	*	*	*	*	*	Col./ 100 mL	*	01/90	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER											
TYPED OR PRINTED											
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT											
AREA CODE NUMBER YEAR MO DAY											
TELEPHONE DATE											

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)